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Tables for:

GnRH Agonists, Antagonists, and Assisted Conception

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Table 1. Structural Formulae of Native GnRH and GnRH Analogues

	Amino Acid Sequence									
Name	1 pGlu	2 His	3 Trp	4 Ser	5 Tyr	6 Gly	7 Leu	8 Arg	9 Pro	10 Gly-NH ₂
Human GnRH										
GnRH-1	1	2	3	4	5	6	7	8	9	10
GnRH-II	1	2	3	4	His	6	Trp	Tyr	9	10
GnRH III	1	2	3	4	5	6	Trp	Leu	9	10
GnRH agonist										
Nonapeptides										
Leuprorelin	1	2	3	4	5	d-Leu	7	8	9-	N-Et-NH ₂
Buserelin	1	2	3	4	5	d-Ser(Bu ^t)	7	8	9-	N-Et-NH ₂
Goserelin	1	2	3	4	5	d-Ser(Bu ^t)	7	8	9-	AzaGly-NH
Histrelin	1	2	3	4	5	d-His(Imbzl)	7	8	9-	N-Et-NH ₂
Deslorelin	1	2	3	4	5	d-Trp	7	8	9-	N-Et-NH ₂
Decapeptides										
Nafarelin	1	2	3	4	5	(d-Nal) ₂	7	8	9	Gly-NH ₂
Triptorelin	1	2	3	4	5	d-Trp	7	8	9	Gly-NH ₂
GnRH antagoni	st									
Abarelix	D-Ala	D-Phe	D-Ala	4	5	D-Asp	7	Lys(iPr)	9	D-Ala
Antarelix	D-Nal	D-Phe	D-Pal	4	Phe	D-Hcit	7	Lys(iPr)	9	D-Ala
Cetrorelix	D-Nai	D-Phe	D-Pal	4	5	D-Cit	7	8	9	D-Ala
Ganirelix	D-Nal	D-Phe	D-Pal	4	5	D-hArg	7	HArg	9	D-Ala
Iturelix (Antide)	D-Nal	D-Phe	D-Pal	4	NicLys	D-NicLys	7	Lys(iPr)	9	D-Ala
Nal-Glu	D-Nal	D-Phe	D-Pal	4	D-Glu	D-Glu	7	8	9	D-Ala

^{*}Third-generation GnRH-antagonists as used in clinical trials.

Table 2. GnRH Agonists and Antagonist Administration Policy in ART

GnRH					
Analogue	Trade	Administration	Recommended	Minimal Effective	Indications: ART

Genetic Name	Name	Route	Dose	Dose	Yes/No			
GnRH agonist								
Nonapeptides								
Leuprorelin	Lupron	S.C.	500-1000 mcg/d	?	yes			
	Enantone	I.M. depot	3.75-7.5 mg/mo	?	yes			
Buserelin	Suprafact	S.C.	100-500 mcg/d		yes			
	Supercur	I.N.	300-400, 3-4 times daily		yes			
Goserelin	Zoladex	S.C. implant	3.6 mg/mo	?	seldom			
Histrelin	Supprelin	S.C.	100 mcg/d	?	no			
Decapeptides								
Nafarelin	Synarel	I.N.	200-400 mcg 2/d	?	yes			
Triptorelin	Decapeptyl	S.C.	100-500 mcg/d	50 mcg/d	yes			
		I.M. depot	3.75 mg/mo	?	no			
GnRH antagonist								
Cetrotide	Cetrorelix	S.C.	single dose	2 mg/injection	yes			
		S.C.	multiple dose	0.25 mg/d	yes			
Orgalutran	Ganirelix	S.C.	multiple dose	0.25 mg/d	yes			

S.C., subcutaneous; I.N., intranasal; I.M., intramuscular.